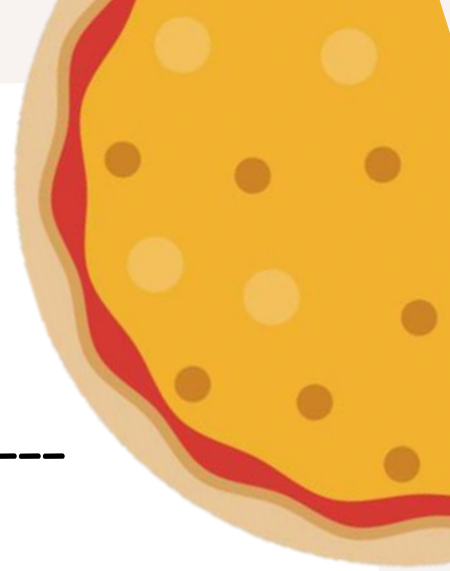


PIZZA PARTY ORDER FORM



Today's Date: ____/____/____

School Site: _____

Classroom: _____

Name of Contact: _____

Contact Email: _____

*We will communicate the "day of" details to the person listed as the contact.

Principal Approval: _____

PARTY DETAILS

DATE OF PARTY

____/____/____

TIME OF PICK-UP

____:____ AM / PM

MEAL COUNT

Student Meals: _____

*Provide the number of students participating in the party.
We will order pizza based on this count (one slice of pizza per student)

Student Meals: FREE



Scan completed form to aconnolly@hbcasd.us
OR
turn into your site's Food Service staff